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Attorney Docket No.: P1485US00

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of : Keith C. Thomas
Serial No. : 09/472,666
Filed : December 27, 1999
Art Unit : 3622
Examiner : Melanie A. Kemper
Title : METHOD AND MEDIA FOR VIRTUAL PRODUCT
PLACEMENT

Assistant Commissioner for Patents
Washington, D.C. 20231

**DECLARATION OF PRIOR INVENTION IN THE UNITED STATES TO
OVERCOME CITED PATENT UNDER 37 C.F.R. §1.131**

Dear Sir:


I, KEITH C. THOMAS, the inventor of the above-identified patent application
declare as follows:

1. Prior to February 15, 1999, I conceived the idea of the method and media for
virtual product placement presently described and claimed in my application as
evidenced by the Invention Disclosure Document.
2. This declaration is submitted prior to final rejection.

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true
and that all statements made on information and belief are believed to be true; and further
that these statements were made with the knowledge that willful false statements and the
like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title

18 of the United States Code, and that such willful false statements may jeopardize the validity of the application of any patent issued thereon.



KEITH C. THOMAS
Citizen of USA
624 Sterling
Vermillion, SD 57069

7/11/02
Date



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Invention DISCLOSURE FORM

GATEWAY NUMBER: 98-1176

Design / Utility

DATE RECEIVED

Do Not Write Above

Use Tab Key to Navigate the Fields
Completely Answer Each Field

The Information You Put In Box 1, 2, and 3 is the Only Explanation Of Your Invention That The Patent Review Board Will Read.
Make It Clear And Concise So That The PRA Can Easily Determine The Value Of Your Invention.

Title Of Invention: Advertising In Games

1. Describe Invention In Detail And How To Build Or Implement It:

My idea is to have billboards and other places in games where advertising could be sold. This might allow the game to be given away for free, but the most popular games could sell advertising based on the number of the games and the location in the game. In some cases, the game might be a weekly installment downloaded off the web or a new CD sent out, in which the new installment would have new advertisements. In other cases, there might be automatic updates from the web that would include new ads. The ads could be billboards or actual items in the game such as cars or pop cans.

2. What Is The Closest Technology Of Which You Are Aware:

Web banners.

3. How Is Your Invention Different From Present Technology:

I don't know of any technology for advertising in games.



Invention DISCLOSURE FORM

4. When was this invention first conceived: [REDACTED]

5. When was this invention first documented: [REDACTED]

6. Are there any written records such as laboratory notes, e-mail, meeting notes, or etc in which this invention is described and where can they be found:
Yes, Keith Thomas log book.

7. If you or your co-inventors have described this invention in whole or in part in manuscripts, reports, oral presentations, sales pitches, advertisements, posters, or others describe and state who/when/where:
None.

8. If this invention is planned for public use, offer for sale, or part of Gateway's product state when/where:
None.

9. List any witnesses who can corroborate the development of this invention. Give names, dates, addresses, and phone numbers:
Stephen Yossler.

Attach all Drawings, Flow Charts, Schematics, E-mail, and other documentation to this form.

Definition Of A Witness: A person who understands and acknowledges the invention as put forth in this disclosure

Signature Of Two Persons Witnessing And Understanding This Disclosure

[Signature]
Signature

[REDACTED]
Date

I. P. Prog Mgr
Title

[Signature]
Signature

[REDACTED]
Date

KEPVH
Title



Invention DISCLOSURE FORM

Primary Inventor (Originator of Idea)

Full Legal Name (Last, First, M.I.): Thomas, Keith C. Date Signed: _____

SIGNATURE: _____

Full Legal Address: Street: 624 Sterling City: Vermillion State: SD Zip: 57060

Country of Citizenship: US Pay Grade 39 or Above (Yes/No): Yes

Work Phone & Extension: 22229 Home Phone: 605-624-2600 Social Security #: 304-86-7186

Your Supervisor: Tony Olsen/Mike Holstein Your Primary Area(Pick One): [Desktop Or: Choose]

Inventor #2

Full Legal Name (Last, First, M.I.): _____ Date Signed: _____

SIGNATURE: _____

Full Legal Address: Street: _____ City: _____ State: _____ Zip: _____

Country of Citizenship: _____ Pay Grade 39 or Above (Yes/No): ?

Work Phone & Extension: _____ Home Phone: _____ Social Security #: _____

Your Supervisor: _____ Your Primary Area(Pick One): [Choose Or: Choose]

Inventor #3

Full Legal Name (Last, First, M.I.): _____ Date Signed: _____

SIGNATURE: _____

Full Legal Address: Street: _____ City: _____ State: _____ Zip: _____

Country of Citizenship: _____ Pay Grade 39 or Above (Yes/No): ?

Work Phone & Extension: _____ Home Phone: _____ Social Security #: _____

Your Supervisor: _____ Your Primary Area(Pick One): [Choose Or: Choose]

Inventor #4

Full Legal Name (Last, First, M.I.): _____ Date Signed: _____

SIGNATURE: _____

Full Legal Address: Street: _____ City: _____ State: _____ Zip: _____

Country of Citizenship: _____ Pay Grade 39 or Above (Yes/No): ?

Work Phone & Extension: _____ Home Phone: _____ Social Security #: _____

Your Supervisor: _____ Your Primary Area(Pick One): [Choose Or: Choose]

Inventor #5

Full Legal Name (Last, First, M.I.): _____ Date Signed: _____

SIGNATURE: _____

Full Legal Address: Street: _____ City: _____ State: _____ Zip: _____

Country of Citizenship: _____ Pay Grade 39 or Above (Yes/No): ?

Work Phone & Extension: _____ Home Phone: _____ Social Security #: _____

Your Supervisor: _____ Your Primary Area(Pick One): [Choose Or: Choose]

Inventor #6

Full Legal Name (Last, First, M.I.): _____ Date Signed: _____

SIGNATURE: _____

Full Legal Address: Street: _____ City: _____ State: _____ Zip: _____

Country of Citizenship: _____ Pay Grade 39 or Above (Yes/No): ?

Work Phone & Extension: _____ Home Phone: _____ Social Security #: _____

Your Supervisor: _____ Your Primary Area(Pick One): [Choose Or: Choose]